

SALESPERSON LICENSE APPLICATION

MIVDD 01 (07/01/2010)									
MVDB USE ONLY									
Dealer Cert #									
License Exp Date									
License Fee									
Tech Initials									

Purpose:

Use this form to apply for a salesperson license.

Instructions: Complete sections 1, 2 and 3. Request your employing dealership to complete

section 4. Mail	completed form	and suppoi	rting o	documentation to	MVDB at the	he abov	∕e ad	dress.			
		1. API	PLIC	ATION TYPE							
Original							Transfer (attach existing license if available				
		2. APPLIC	CANT	INFORMATION					<u> </u>		
FULL LEGAL NAME (last)			(middle)				(suffix)				
LIST ANY AND ALL NAMES USED (aliases, maiden name, nicknames, etc.)					CURRENT EMAIL ADDRESS						
RESIDENCE STREET ADDRESS			CITY	(STA	ATE	ZIP CODE		
GENDER (check one) RACE	WEIGHT	HEIGHT		EYE COLOR	HAIR COLOR	SC	CIAL S	SECURITY	NUMBER		
Male Female	.lbs	ft.	in.		1						
PLACE OF BIRTH (city/county, state, country		_		BIRTH DATE (mm/dd/	PRIMARY CONTACT PHONE NUMBER ()						
3. APPLI	CANT CERTIFIC	CATION - (CONS	SENT FOR CRIM	MINAL HIST	ORY C	HEC	K			
Virginia Code § 46.2-1575 lists specific circumstances under which a license for a motor vehicle dealer salesperson or dealer-operator license may be denied. Specifically, your application for a license may be denied for having been convicted of any of the following offenses:											
Any criminal offense classified as a felony. Larceny of a vehicle or receipt or sale of a stolen vehicle											
Any criminal act involving the business of selling vehicles. Odometer tampering or any related violation.											
Any fraudulent act in connection with the business of selling vehicles or any consumer-related fraud.											
Each application will be reviewed carefully and consideration will be given to all relevant information. If you have been convicted of any of the listed offenses, submit with your application, documentation and/or written explanation or statement concerning the convictions.											
Note: You should include attested copies of your convictions and if you have been released from probation/parole, evidence of this fact.											
A. Have you ever been refused a motor vehicle dealer's or salesperson's license or had such license suspended or revoked?											
B. Have you ever been convicted of a felony?*								□NO			
C. Have your even been consisted of any foundation									□NO		
D. Have you ever been convicted of odometer tampering, larceny of a vehicle or receipt or sale of a stolen vehicle?*											
* If the answer to questions B, C, or D is YES, attach a copy of conviction record(s), name of probation officer, date(s), and court jurisdiction(s).											
I understand that untruthful or misleading answers are cause for denial of the application. I further understand that it is unlawful to knowingly make a false statement and any violation may be prosecuted to the full extent of the law. I authorize the Motor Vehicle Dealer Board to conduct a criminal history inquiry solely for the purpose of evaluating my application.											
I certify and affirm that all the information presented in this form is true and correct. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.											
APPLICANT NAME (print) APPLICANT SIGNATURE								DATE (mm/dd/yyyy)			
PRIVACY NOTICE: In accordance with Virginia Code §§ 2.2-803 and 2.2-4800, et al., the State Comptroller requires that this information, including your social security number, be collected for debt set off collection purposes.											
4. EMPLOYING DEALER CERTIFICATION											
TRADING AS NAME	PRIMARY CONTACT PHONE NUMBER () DEALER CERT. NUMBER										
BUSINESS STREET ADDRESS		, <u></u>	CITY				STAT	E	ZIP CODE		
Criminal Record Check Vendor	(original application	VENDOR	NAME	-	BA	CKGROUI	ND CH	ECK REPO	PRT NUMBER		
Complete if the dealer performs the crimir											
I certify that the applicant named herein is employed by the firm as a salesperson or representative and is not an independent contractor. If application is for a salesperson's license, I certify the applicant is not employed by another dealer unless the dealerships are owned by the same person, partnership or corporation. I certify and affirm that all the information presented in this form is true and correct. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.											
OWNER / PARTNER / OFFICER NAME (print)			OWNER / PARTNER / OFFICER SIGNATURE DATE (mm/dd/yyyy)								